Department of HUMAN SERVICES

Incident Reporting Process Collaborative Training

WELCOME

Department of HUMAN SERVICES

Introduction

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Moderator: Courtney Ackerson, HCBS Training Specialist

Objectives

- Review Iowa Administrative Code (IAC) requirements for incident reporting
- Define the difference between a major and minor incident
- Identify updates to the reporting process for fee for service (FFS) members
- Review example cases to understand reporting categories
- Gain knowledge regarding incident report troubleshooting and resources for each reporting entity

Iowa Administrative Code: Chapter 77

- Habilitation Services- 77.25 (3)
- Health & Disability (HD) Waiver- 77.30 (18)
- Elderly Waiver- 77.33 (22)
- AIDS/HIV Waiver- 77.34 (14)
- Intellectual Disability (ID) Waiver- 77.37 (8)
- Brain Injury (BI) Waiver- 77.39 (6)
- Physical Disability Waiver- 77.41 (12)
- Children's Mental Health (CMH) Waiver- 77.46 (1)*d*

Iowa Administrative Code

- Defines major and minor incidents for HCBS waiver and Habilitation Services
- Identifies reporting requirements for major incidents
- Incident definitions and reporting timelines are the same for fee-for-service (FFS) members and managed care (MCO).
  - The difference is in the reporting process for each entity and is addressed later in this training
- Informational Letter 2128-MC-FFS clarifies that an incident report is required for any HCBS waiver or Habilitation member regardless if direct services were being provided at the time of the incident

Reporting Examples

Major Incident Report Required - Examples

- Medication error resulting in physician's treatment
- Abuse (including when reported to DHS Abuse Hotline)
- Death
- Hospitalization/ER visit due to injury/mental heath treatment
- Law enforcement intervention
- Location Unknown- lack of supervision

Minor Incident Report – Examples

- Medication error- no reaction or no treatment needed
- Seizures with no physical injury
- Injury resulting in basic first-aid, bruising
- Injury to others resulting in basic first-aid, bruising
- Destruction of property

Definition of Major Incident

An occurrence involving a member enrolled in waiver (or Habilitation) services:

1. Results in a physical injury to or by the consumer that requires a physician's treatment or admission to a hospital;
2. Results in the death of the member;
3. Requires emergency mental health treatment for the member;
4. Requires the intervention of law enforcement;

Definition of Major Incident (cont.)

5. Results in a report of child abuse pursuant to Iowa Code section 232.69 or a report of dependent adult abuse pursuant to Iowa Code section 235B.3;

- Report suspected dependent adult/child abuse
- Complete a major incident report
- DHS abuse hotline and Iowa Medicaid are not the same
- Regardless of DHS decision to accept or reject intake a major incident report is still required

Definition of Major Incident (cont.)

6. Constitutes a prescription medication error or a pattern of medication errors that leads to the outcome in paragraph “1,” “2,” “3”; or “5”

- Update to Chapter 90 did not include prescription errors in the definition of major incident
- The error will be corrected
- All Providers, including case managers are expected to follow the most restrictive guidelines regardless of which chapter or code is being referenced

Definition of Major Incident (cont.)

7. Involves a member's location being unknown by provider staff who are assigned protective oversight.

This is when services or supervision by staff is to be provided or is scheduled.

Storing a Major Incident Report

- Major incident is reported through IMPA/MCO portal
- Make notation that incident report was completed in member's file
- Actual print out of incident report is not necessary
- Follow agency's policy and procedures regarding storage of incident reports
- Questions, contact your HCBS Specialist

Minor Incident

An occurrence involving a member that is not a major incident which-

1. Results in the application of basic first aid
2. Results in bruising
3. Results in seizure activity
4. Results in injury to self, to others, or to property
   (**No physician or hospital treatment needed)**
5. Constitutes a prescription medication error
   (No physician or hospital treatment needed)

Reporting a Major Incident

Who reports

- First to know of incident
- Service providers
- Service workers
- Case managers, Targeted Case managers, Community Based Case Managers, Integrated Health Home Care Coordinators

Who does not report

- Consumer Choice Options (CCO), Home and Vehicle Modification, and transportation providers, home delivered meal providers, or personal emergency response providers

Reporting a Major Incident (cont.)

When to report

- By the end of the next calendar day from the date the incident occurred or was discovered

What to report

- Name of member
- Date occurred and/or discovered
- Description of incident
- Action agency took to manage incident
- Immediate Resolution/Follow-Up
- Root Cause

Reporting A Major Incident (cont.)

Why is it necessary to report

- State and Federal requirements
- Chapter 24 accreditation
- Best practice for your internal quality improvement plan
- Risk management
- Preventative measures

Major Incident Reporting Examples

- **Medication error** resulting in physician's treatment
  - Miss oral or topical causes reaction/side effect and treatment by physician
- **Alleged abuse** (including when reported to DHS Abuse hotline)
  - Any allegation of abuse requires incident report
  - Abuse reported to DHS requires incident report
  - Box on incident report to note that DHS was notified of the abuse
- **Death**
- **Law Enforcement Intervention**
  - Directly affects the member other than illness or injury
  - Required Incident Report:
    - Assist or intervene with mental health crisis
    - Assist or intervene with elopement
    - Assault
    - Theft
    - Weapons
- **Location Unknown**
  - Member does not have alone time in plan and whereabouts are unknown any length of time
  - Left unattended by assigned staff member - This will also be reported as abuse for denial of critical of care to the DHS Hotline

Major Incident Reporting Examples (cont'd)

Hospitalization/ER visit due to injury/mental health treatment

- Transported to ER for **physical injury** by car, ambulance, agency, parents, self, etc.
  - Examples that **REQUIRE** Incident Report (not all inclusive)
    - Fracture or seen and no fracture
    - Stitches/staples or just a band-aid
    - Fall and have simple bump or requires treatment
    - Potential concussion or seen and no concussion
    - Swallowed coin and needs removed
  - Examples that do **NOT** require an Incident Report (not all inclusive)
    - Seizure requires emergent care but no physical injury
    - Any type of medical illness
      - Bowel obstruction, respiratory infection, UTI, catheter issues, follow-up from a surgery, flu-like symptoms, being admitted for a scheduled procedure, etc.
  - Mental Health Treatment
    - Suicidal Ideation is included in mental health treatment
    - Incident Report is required regardless if member is admitted or not

Minor Incident Reporting Examples

- Medication error- no reaction or no treatment needed
  - Agency track and trend occurrences
  - Too many missed medications will likely result in having side effects/reactions requiring physician treatment
- Seizures with no physical injury
- Injury resulting in basic first-aid, bruising
- Injury to others resulting in basic first-aid, bruising
- Destruction of property

Critical Incident Report Submission Instructions

Accessing the Form 470-4698 (cont.)

Click here for the
User Registration Guide

Featured Functionality

- Please note that if you are uploading medical information to IME related to the Level of Care review process, the IME Quality I determination of the member's level of care certification for fee-for-service and MCO members. The IME QIO or the member's has been a significant change in the level of care. Please send the medical information to IME or the appropriate MCO. If the member is a MCO member, please send the medical information to the appropriate MCO.
- **View COVID-19 DHS Resources**
- **Provider Informational Letters** - **Subscribe and/or Unsubscribe!**
- **Provider incident reporting** - As a provider, you can have the ability to report, track and monitor incidents in "real time".
- **Remittance Advice** - View weekly remittance advice online at your convenience.
- **Presumptive Eligibility** - Medicaid Presumptive Eligibility Portal can be accessed at this link: **http://dhsmpep.iowa.gov**
- **Find a participating Medicaid provider**
- **Provider Reenrollment and OCD User Guide**
- **Critical Incident Report Form**
- **HCBS Residential Member Assessment Form**
- **HCBS Residential Member Setting User Manual**

Completing Form 470-4698

IMPA 101

- **IMPA is used <u>ONLY for fee-for-service members</u>**
- You must have Adobe NOT Adobe Reader
- Save the form to your desktop before completing
- Complete the form in its entirety as there are required fields
- Choose only ONE service/waiver program (If the member is currently enrolled with MFP, please choose MFP and not another waiver service)

Completing Form 470-4698

IMPA 101 Cont'd

- Do not choose "other" as a service program (this is reserved for MCO use only)
- "Verify Validations" at end of form
- **Always** include an Immediate Resolution and Root Cause (it will be returned to you if missing)
- Incident reports are not accepted via email
- Upload to the proper IMPA file, "Critical Incident File"

Fee For Service (FFS) Reporting Process

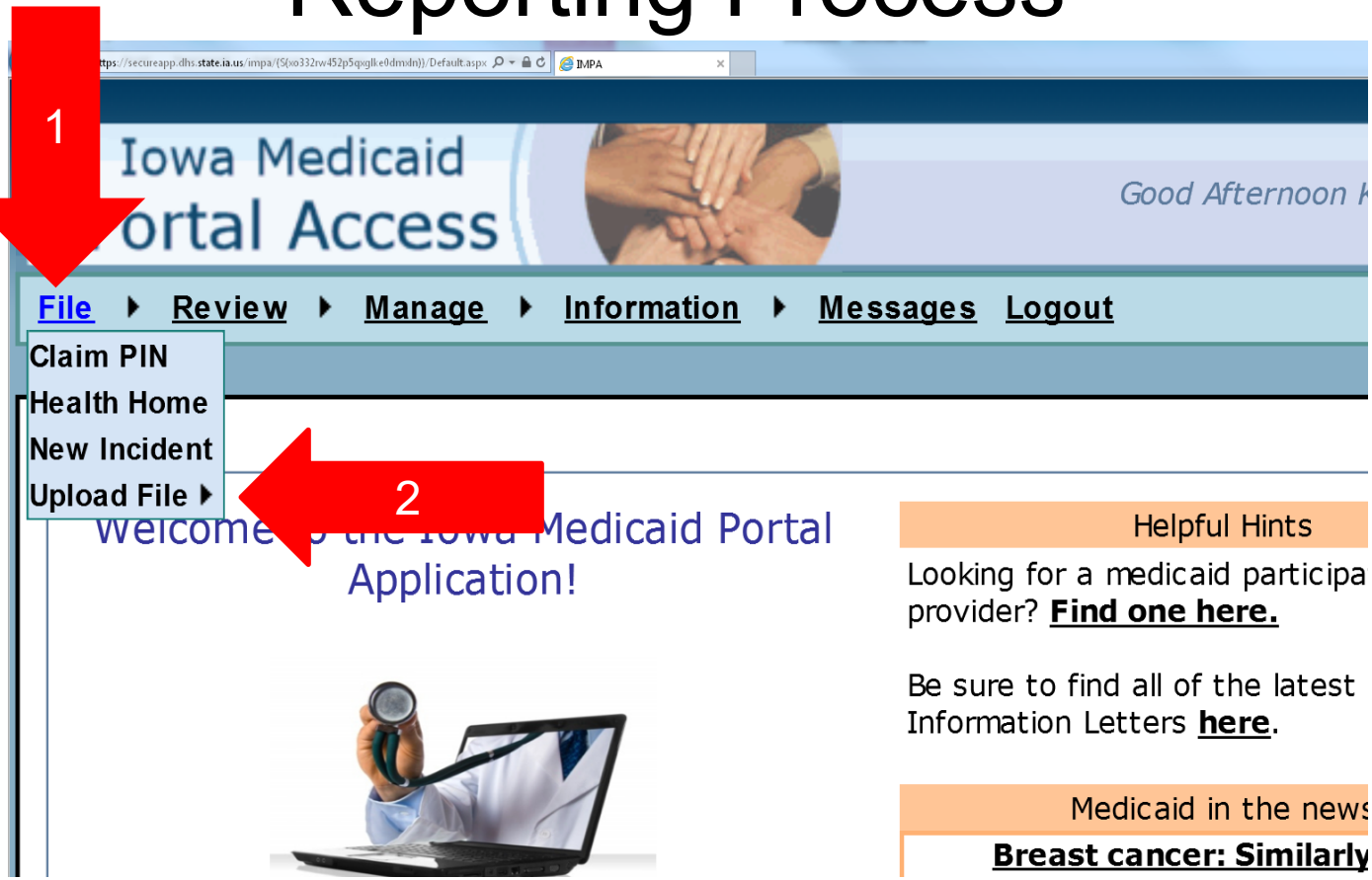


Image: Iowa Medicaid Portal Screen

FFS Reporting Process (cont.)

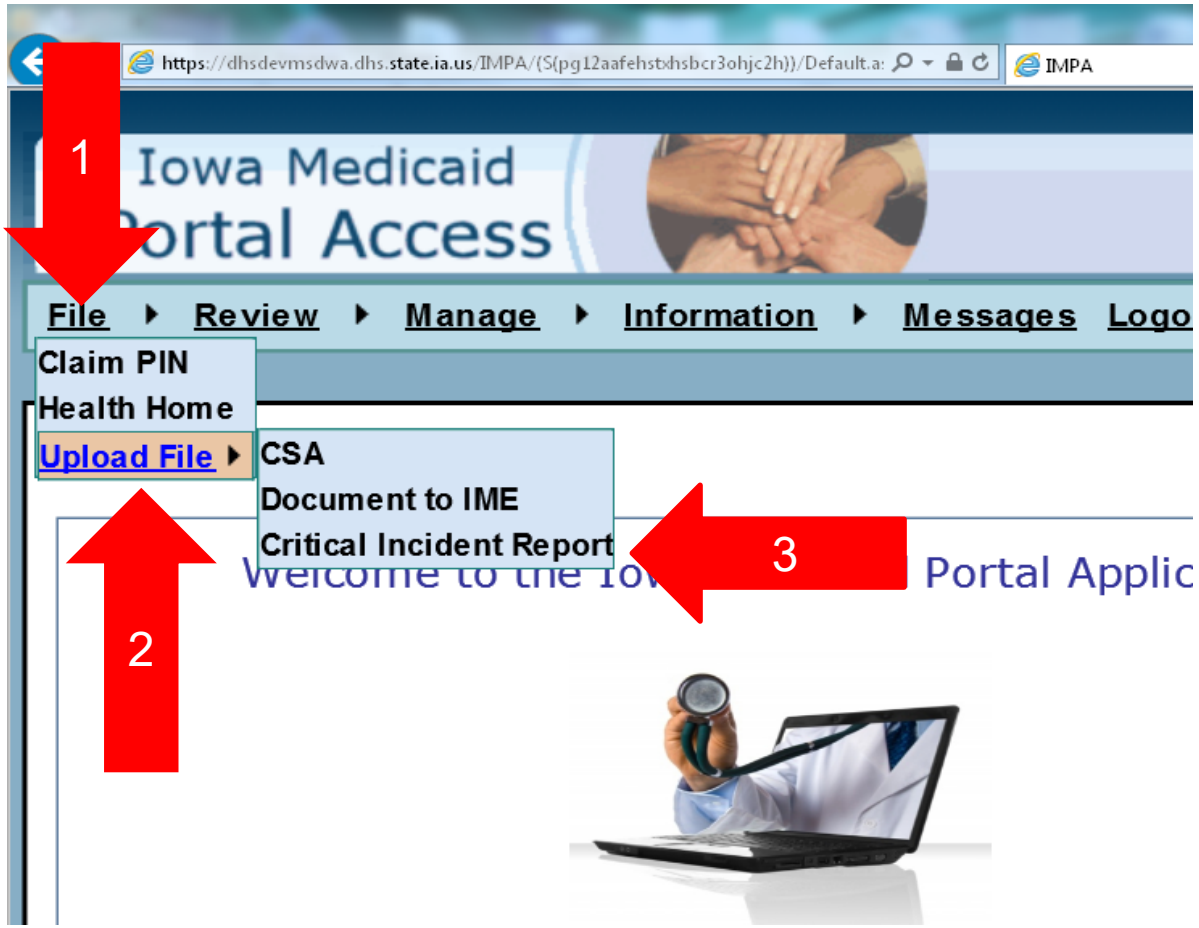


Image: Iowa Medicaid Portal Screen

FFS Reporting Process (cont.)

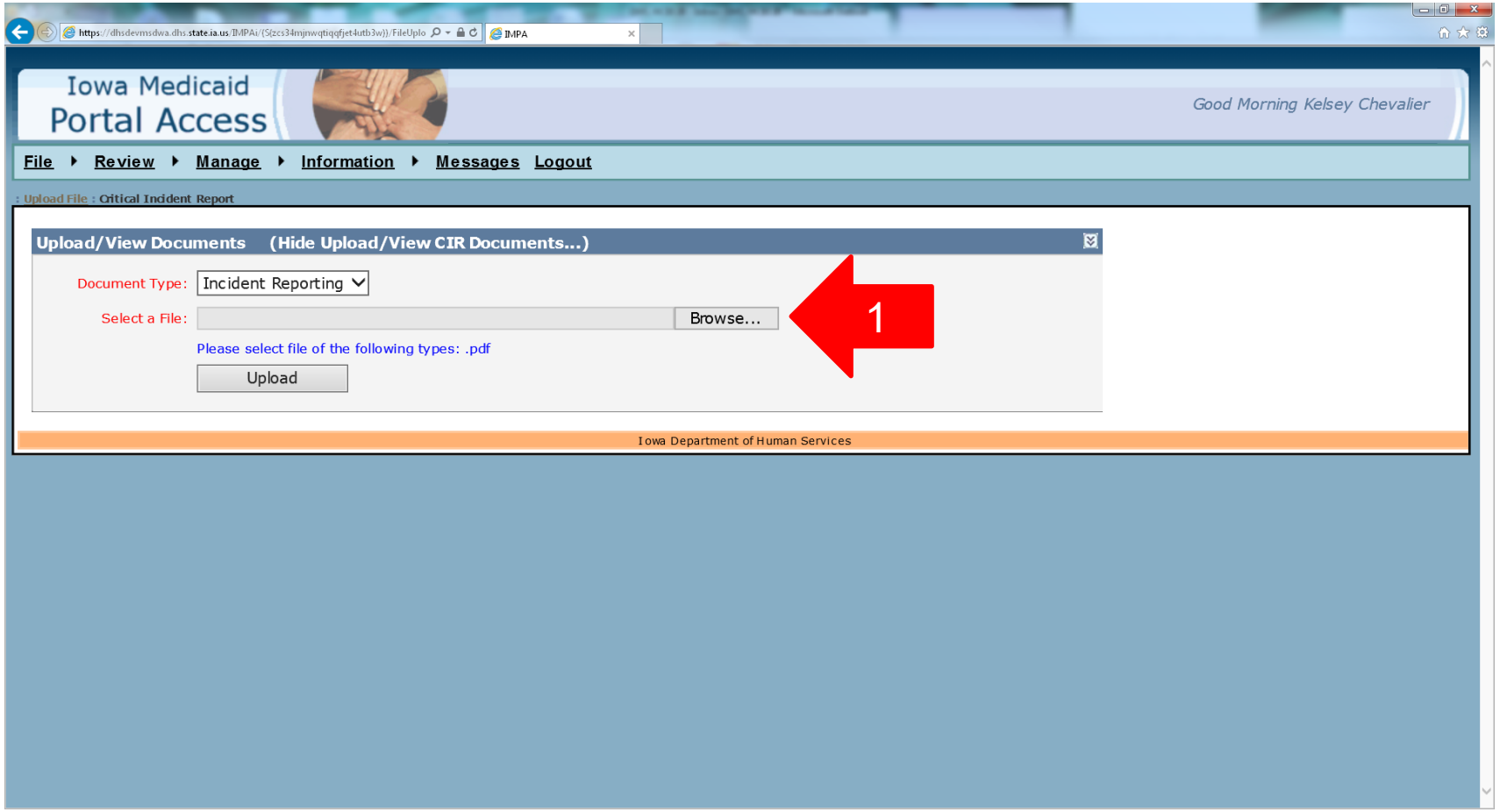


Image: Iowa Medicaid Portal Screen

FFS Reporting Process (cont.)

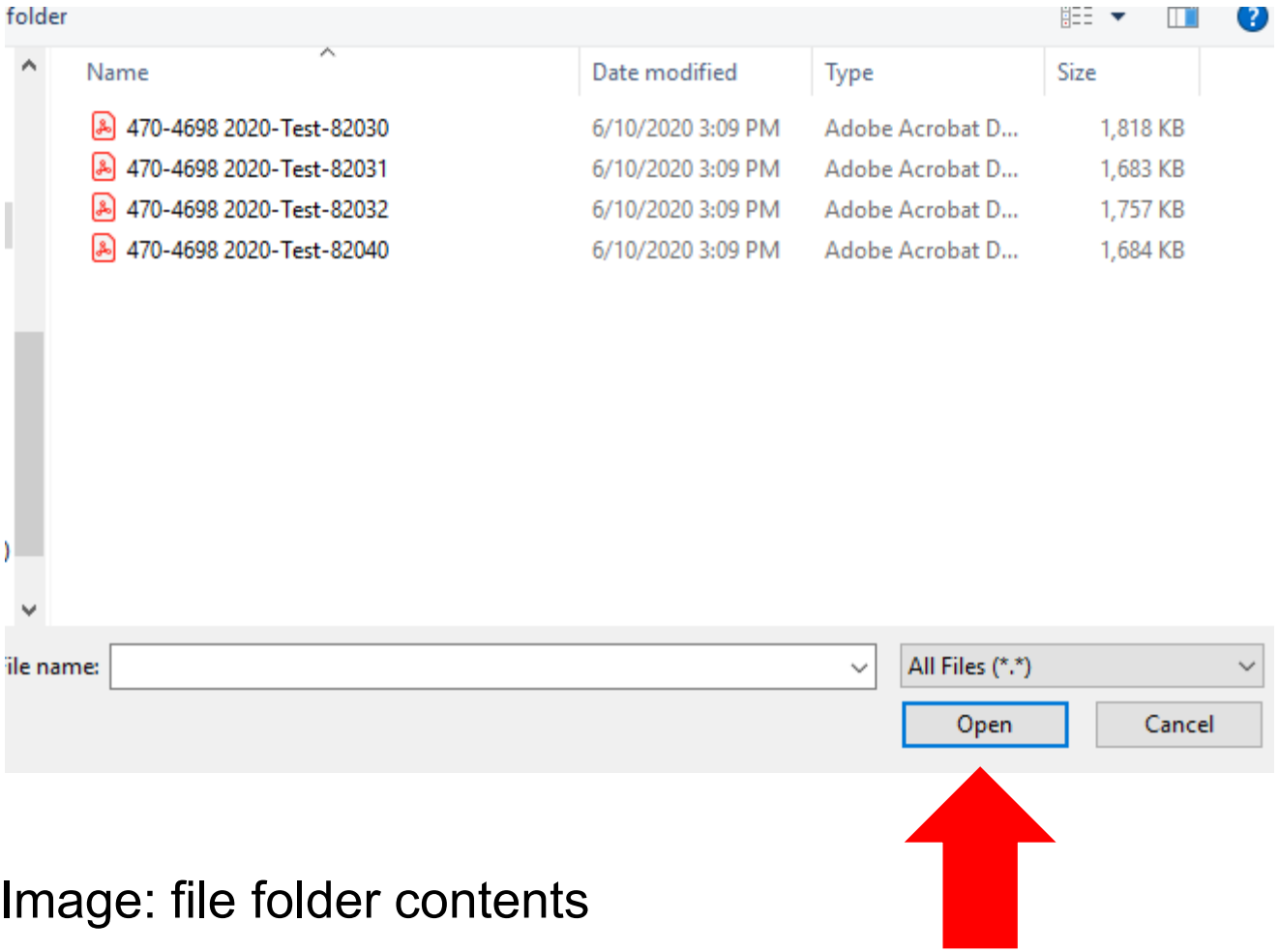


Image: file folder contents

FFS Reporting Process (cont.)

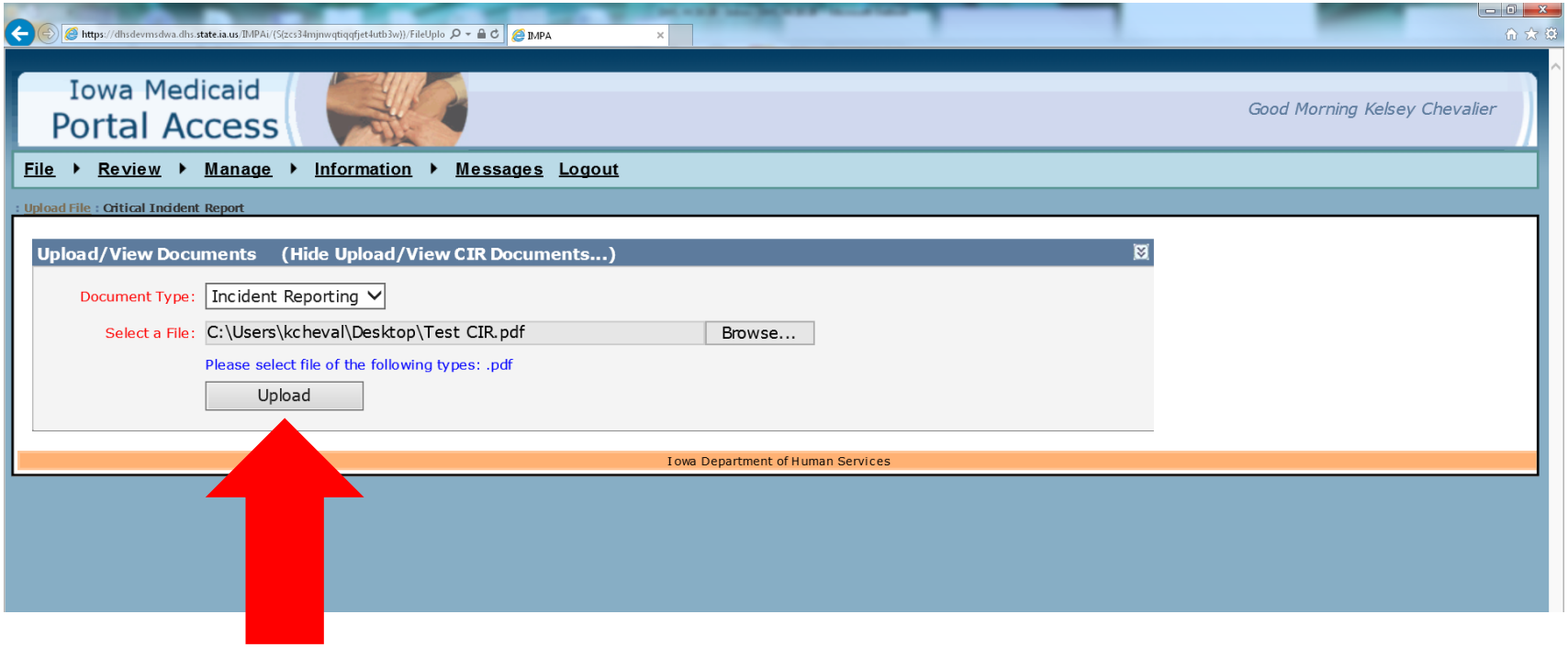


Image: Iowa Medicaid Portal Screen

FFS Reporting Process (cont.)

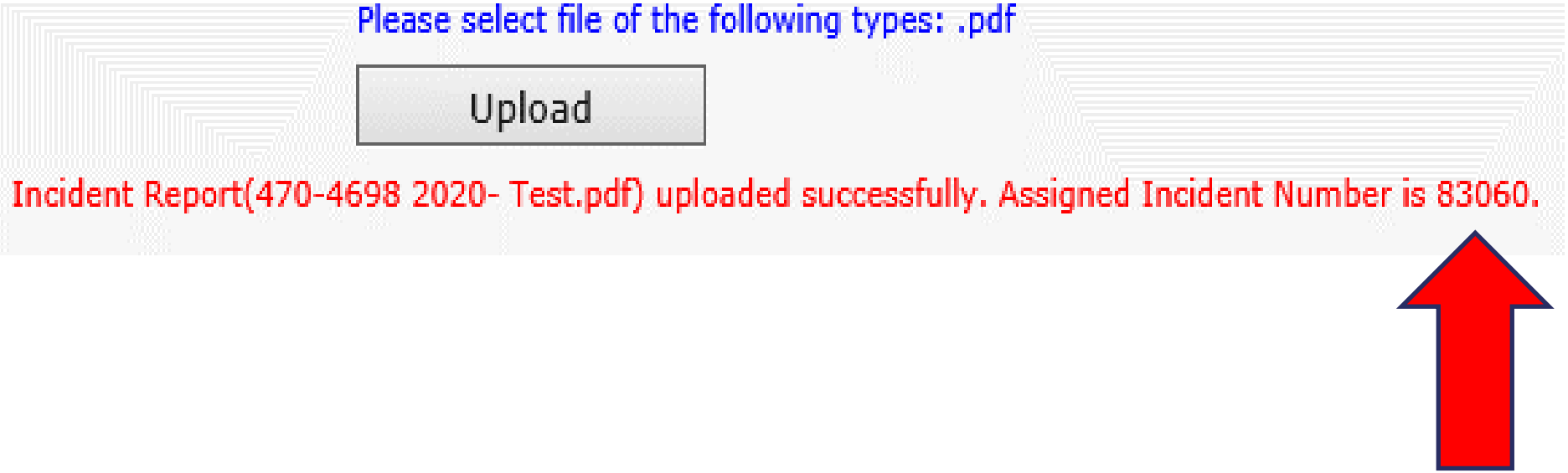


Image: Iowa Medicaid Portal Access screen with the upload button.

Viewing incidents

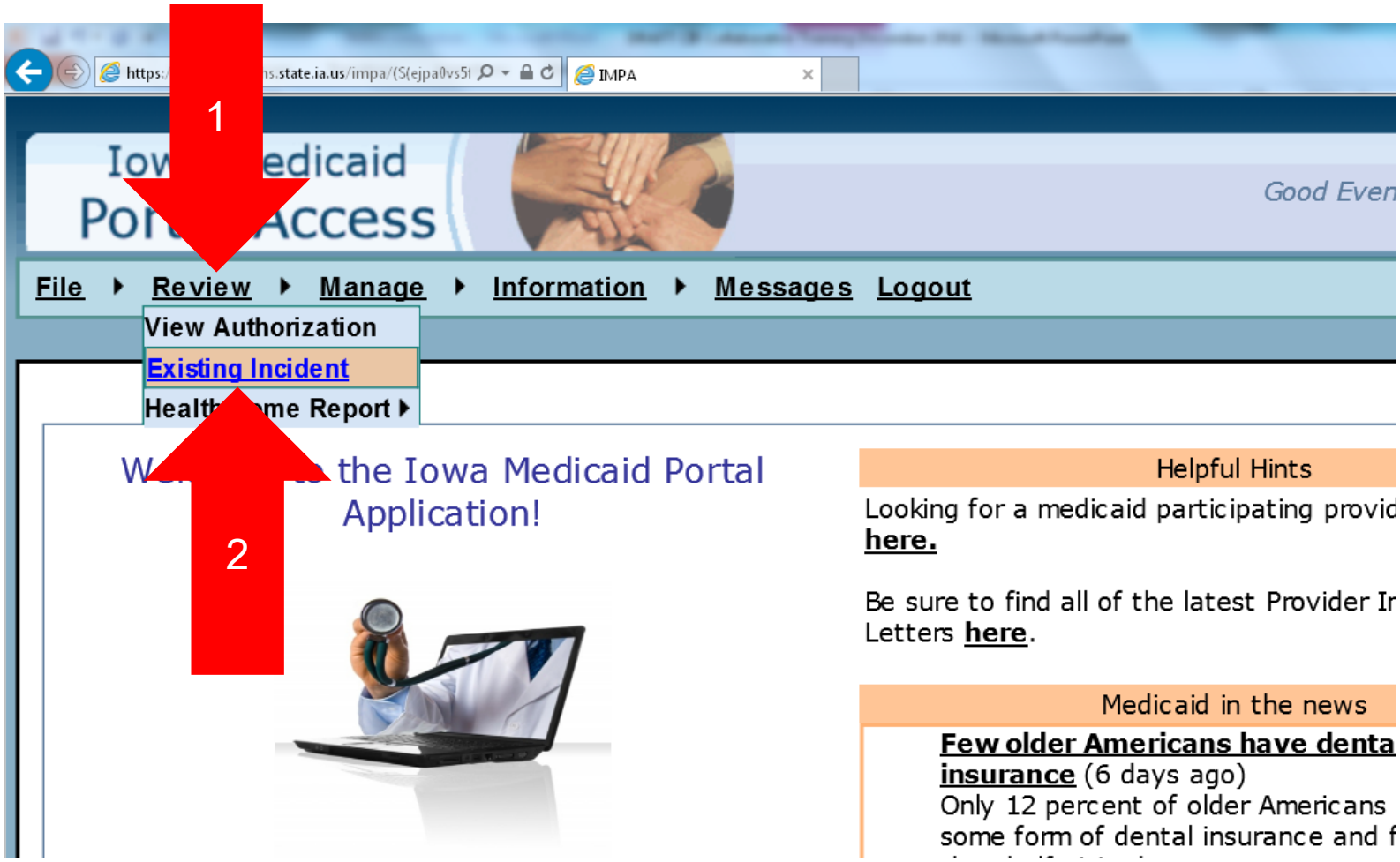


Image: Iowa Medicaid Portal Screen

Viewing Incidents (cont.)

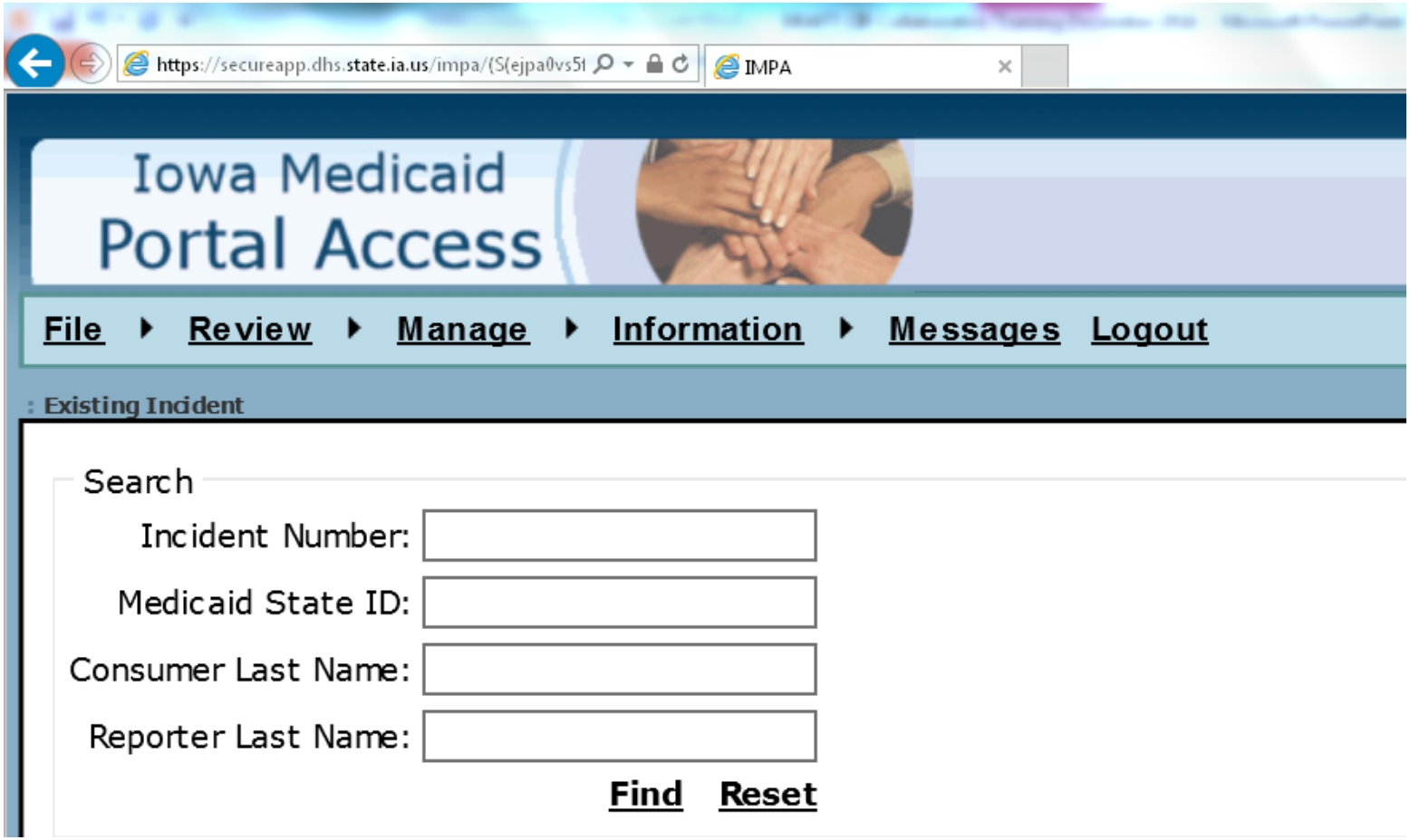
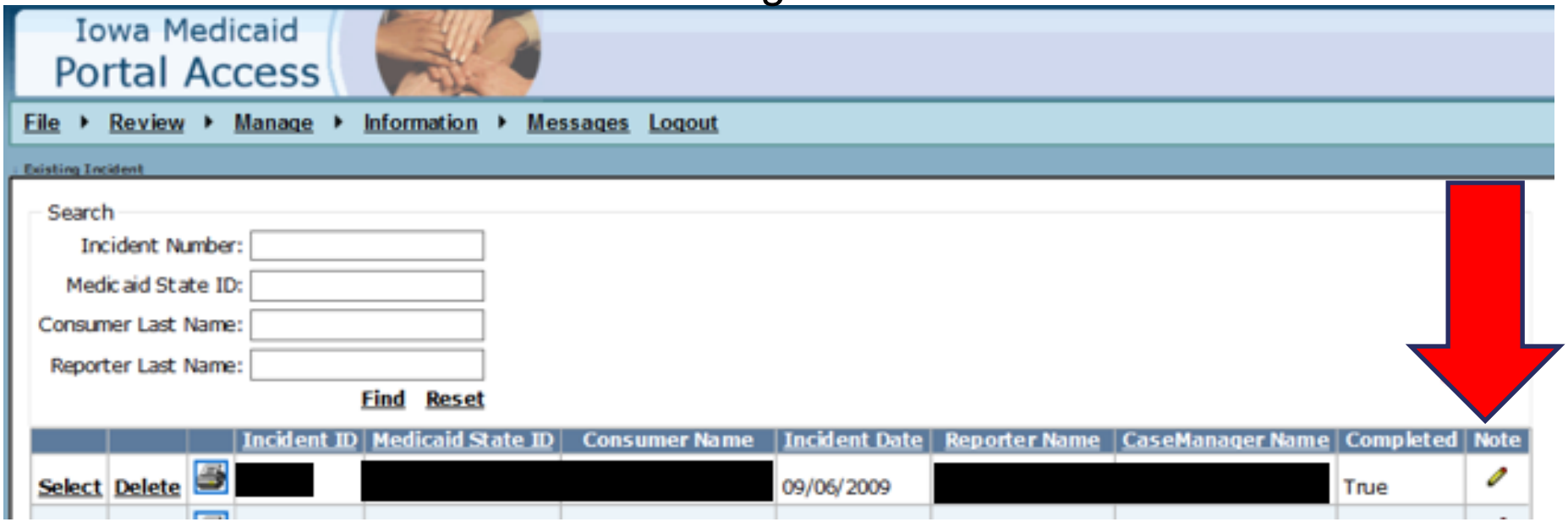


Image: Iowa Medicaid Portal Screen

Updating an Incident previously submitted

- Search member
- Identify report needing the update
- Select the pencil

Image below: Iowa Medicaid Portal Screen



FFS Reporting Process (cont.)

IoWANS Workflow

- Case Managers answer milestones in IoWANS

IMPA

- Disable users when employment ends

Common Reporting Errors

Choosing the Incident Type

Physical Injury

- Seen for actual physical injury and not medical illness or other issue
- If member was not seen for a physical injury and no other incident types on incident form match or makes sense, then re-evaluate if form actually needs to be completed
- Check Iowa Administrative Code, this presentation, email the HCBS IR mailbox

Common Reporting Errors

Choosing the Incident Type

Law Enforcement

- Law enforcement was not directly related to a member issue then an incident report is not required
  - Examples of when an incident report is not required when law enforcement is called
    - Potential Intruder to the family home
    - Involved in a motor vehicle accident and police were on scene
    - Member requires transport to the hospital via ambulance, not related to a physical injury
    - Member calls 911 to come to the home for reason other than abuse, assault, mental health crisis, physical injury, etc.

Medication Error

- Incident type on form specific to medication errors
- Do NOT mark physical injury

Common Reporting Errors (cont'd)

Root Cause

- Required and tracked by CMS
- Every incident report submitted is reviewed for content and root cause
- Root cause is missing, form will be returned to be corrected

Incident Reports are for the **member**

- Completed for an incident that occurred directly to the member named on the form
- Clarify definition of major incident
  - To or **by** the consumer that requires a physician's treatment or admission to the hospital. "By the consumer" is if the member has hurt themselves or is being self-injurious
  - Do not send reports if member has hurt staff, another member, family, etc. that required physician care

Emergency Room (ER) Claim Review

- ER Claims are pulled on a monthly basis
- Diagnosis codes are filtered to identify those meeting the definition of a major critical incident
- Critical Incident reports are matched to the ER claims
- Case Managers are contacted regarding ER claims without an incident report
- Case Mangers responsibility to obtain the information, complete the incident report, and load it into IMPA

Ensuring all incidents are reported

- Case Managers should ask members about ER visits each time they talk/meet
- Providers should ask members when they see them if they have been in the ER since the last time services were provided

Managed Care Organizations (MCO)

- Amerigroup
- Iowa Total Care
- All of the same waivers, rules, definitions, reporting
- When member is enrolled with an MCO, a critical incident report does not need to be submitted to Iowa Medicaid

Amerigroup: Accessing the Critical Incident Report Form

Where to Submit the Incident

First check to ensure the incident was not submitted by the provider

https://provider.amerigroup.com/iowa-provider/home

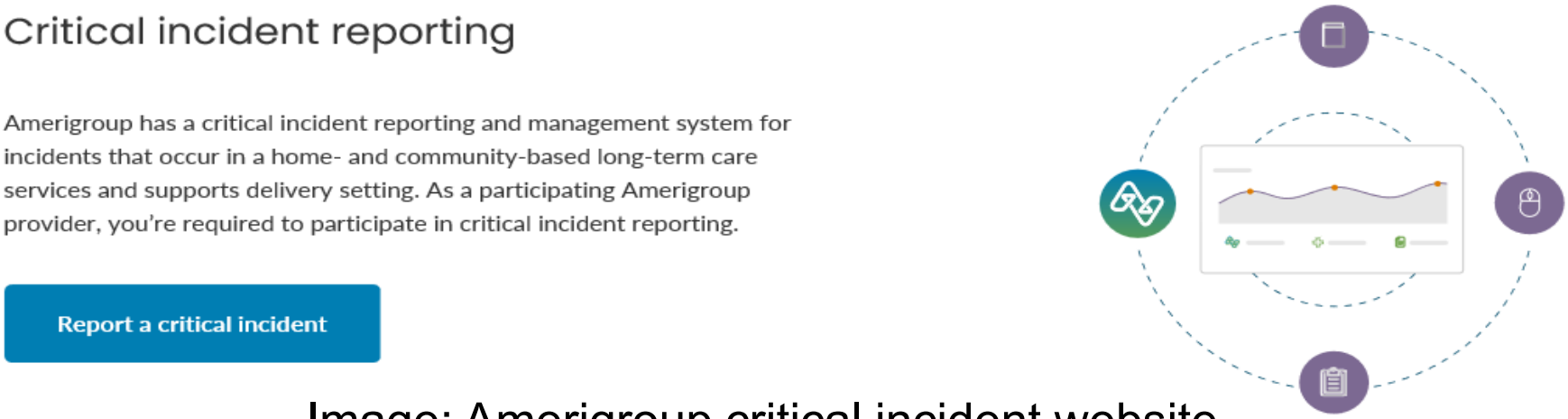


Image: Amerigroup critical incident website.

The Form

Iowa Critical Incident Form

Please fill out the form completely, including all required fields. Remember to select **submit** to electronically send to Amerigroup Iowa, Inc.

If you have questions regarding the form or need to update a previously submitted form, please call us at 5[illegible]327-7012, ext. **1061035185**.

Please note: This tool does not have the ability to save entered data and retrieve it at a later date.

Iowa Department of Human Services

Iowa Medicaid Critical Incident Report

Date Received: mm/dd/yyyy	Incident ID:	Staff Reviewer:

Instructions: *Submit all pages of this form with as much information as possible within the required reported timeframes.*
Note: ** indicates required field.*

Incident Status*:

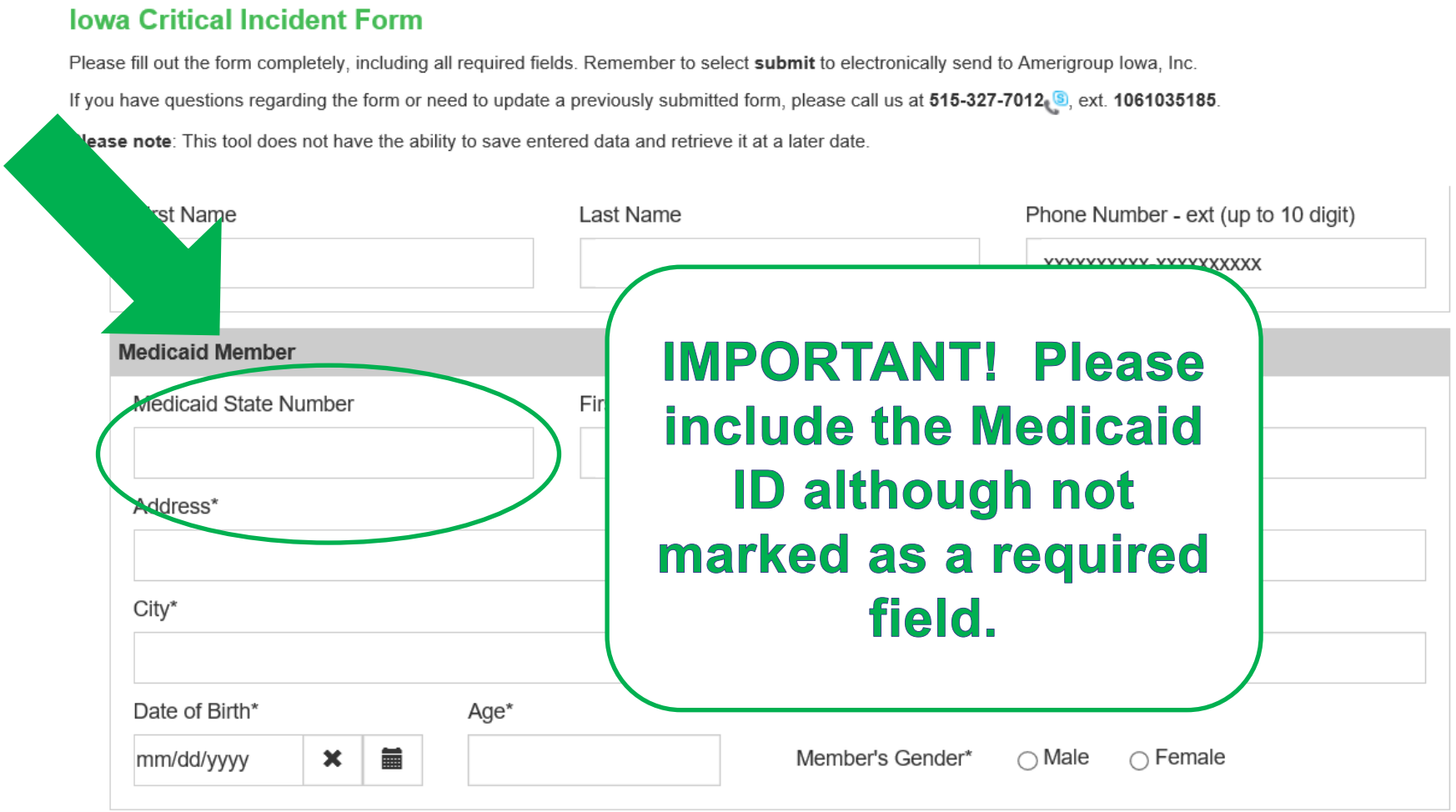
- ○ Initial (Pending further investigation)
- ○ Completed (investigation completed)
- ○ Additional information added

Manage Care Organization*:

- ◉ Amerigroup Iowa
- ○ UnitedHealthcare Commun[illegible] Plan
- ○ Non-MCO

Provider/Facility Information

The Form


Iowa Critical Incident Form
Please fill out the form completely, including all required fields. Remember to select submit to electronically send to Amerigroup Iowa, Inc.
If you have questions regarding the form or need to update a previously submitted form, please call us at 515-327-7012, ext. 1061035185.
lease note: This tool does not have the ability to save entered data and retrieve it at a later date.
rst Name
Last Name
Phone Number - ext (up to 10 digit)
Medicaid Member
Medicaid State Number
Address*
City*
Date of Birth*
mm/dd/yyyy
Age*
Member's Gender*
Male
Female
IMPORTANT! Please include the Medicaid ID although not marked as a required field.

The Form

Iowa Critical Incident Form

Please fill out the form completely, including all required fields. Remember to select **submit** to electronically send to Amerigroup Iowa, Inc.

If you have questions regarding the form or need to update a previously submitted form, please call us at **515-327-7012**, ext. **1061035185**.

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Describe:

Additional Follow-up and Notes (Place additional detail regarding incident or resolution as discovered.)

Describe:

Click BEFORE submitting

Print Form | Submit

Critical Incident Submission Guidelines per Iowa Administrative Code Chapter 77

Major incidents require notification by the end of the next calendar day following the incident. Minor incidents are reported to the staff's supervisor within 72 hours of the incident. Cases of abuse require notification to the DHS Abuse Hotline (1-800-362-2178) and the member's assigned MCO.

Note: Mandatory incident reporting requirements to other entities continue to apply including, but not limited to, Iowa Code Chapter 235B and Iowa Administrative Code Chapter 50.

The Form

Iowa Critical Incident Form

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If you have questions regarding the form or need to update a previously submitted form, please call us at **515-327-7012**, ext. **47107**.

Please note: This tool does not have the ability to save entered data and retrieve it at a later date.

Describe:

Drag textbox down from right corner to expand.

Click to send

Submit

Critical Incident Submission Guidelines per Iowa Administrative Code Chapter 77

Major incidents require notification by the end of the next calendar day following the incident. Minor incidents are reported to the staff's supervisor within 72 hours of the incident. Cases of abuse require notification to the DHS Abuse Hotline (1-800-362-2178) and the member's assigned MCO.

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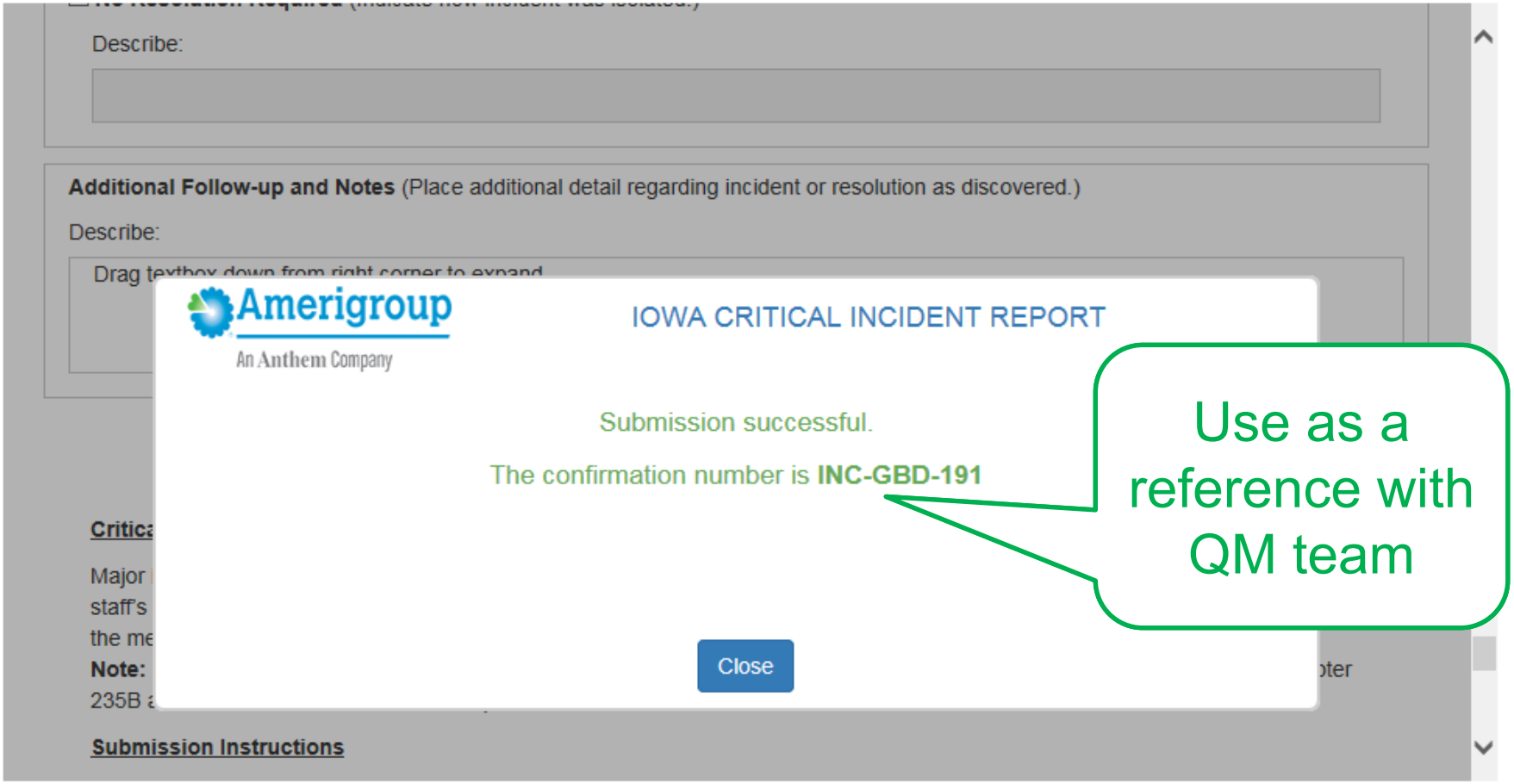
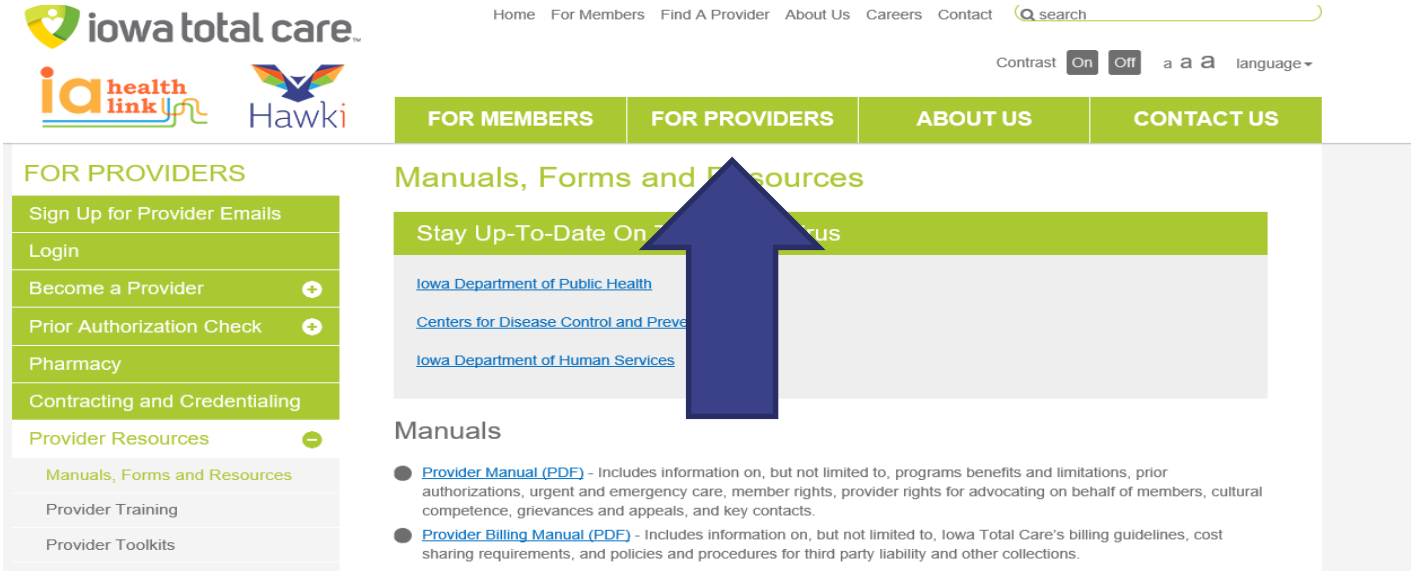
The Form

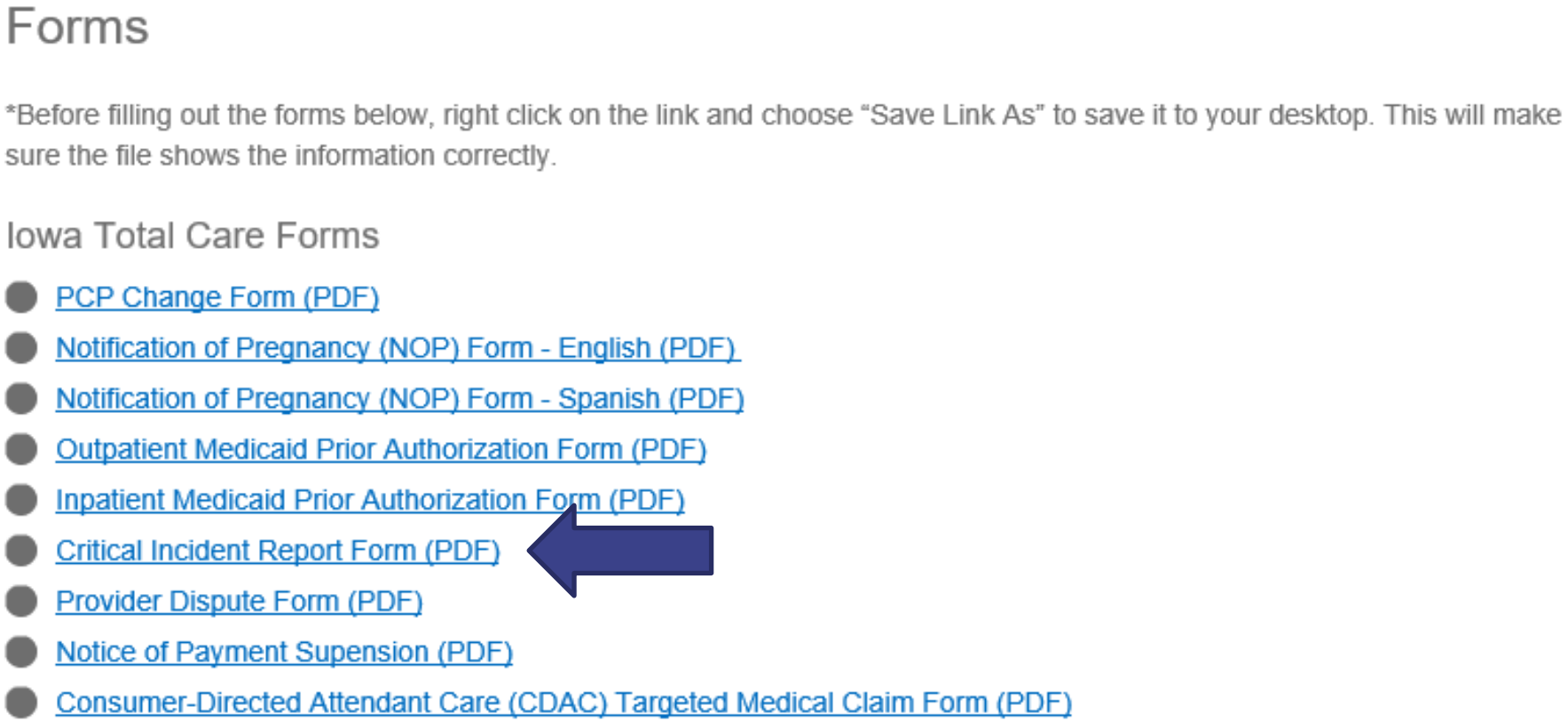

Describe:
Additional Follow-up and Notes (Place additional detail regarding incident or resolution as discovered.)
Describe:
Amerigroup
An Anthem Company
IOWA CRITICAL INCIDENT REPORT
Submission successful.
The confirmation number is INC-GBD-191
Close
Use as a reference with QM team
Submission Instructions

Iowa Total Care Accessing the Critical Incident Report Form



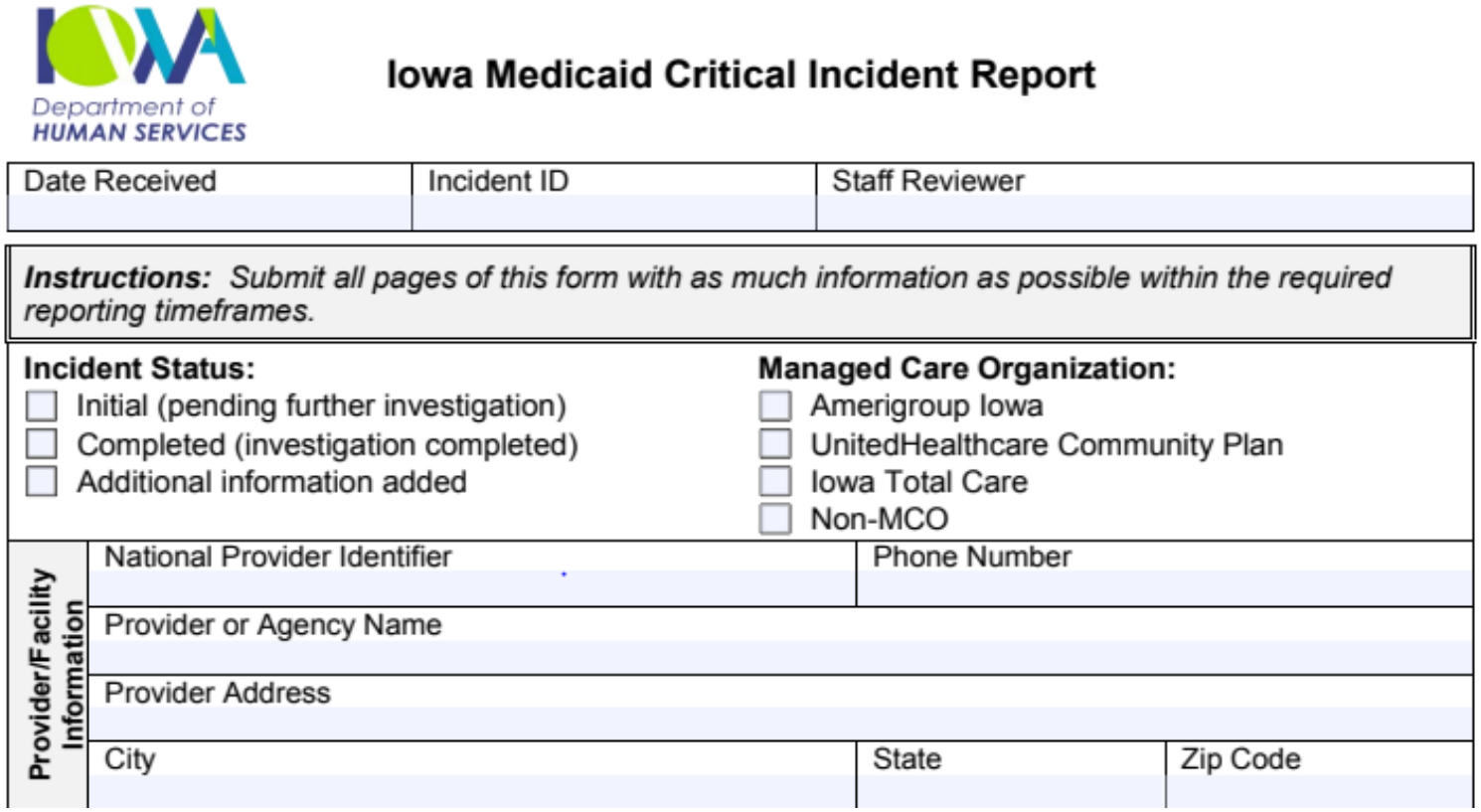
- Log on to the Iowa Total Care website https://www.iowatotalcare.com/
- Select “For Providers”
- From the dropdown menu select manuals, forms, other resources

Iowa Total Care Accessing the Critical Incident Report Form (cont.)



The Critical Incident Report form is listed under the forms section of the website.

Iowa Total Care Accessing the Critical Incident Report Form (cont.)



Department of HUMAN SERVICES

Iowa Medicaid Critical Incident Report

Date Received	Incident ID	Staff Reviewer

Instructions: *Submit all pages of this form with as much information as possible within the required reporting timeframes.*

Incident Status:

- ☐ Initial (pending further investigation)
- ☐ Completed (investigation completed)
- ☐ Additional information added

Managed Care Organization:

- ☐ Amerigroup Iowa
- ☐ UnitedHealthcare Community Plan
- ☐ Iowa Total Care
- ☐ Non-MCO

Provider/Facility Information

National Provider Identifier	Phone Number	
Provider or Agency Name		
Provider Address		
City	State	Zip Code

Be sure to complete each section of the Critical Incident Report Form before submitting to Iowa Total Care.

Iowa Total Care Accessing the Critical Incident Report Form (cont.)

Once the form is completed it will need to be submitted by either fax or email to Iowa Total Care:

Fax 1-833-205-1251

Email QOCCIR@iowatotalcare.com

FFS Resources

- Administrative Code and Rules
  http://dhs.iowa.gov/administrative-rules
- Critical Incident Reporting Location, Guides and Forms
  http://dhs.iowa.gov/ime/providers/rights-and-responsibilities/critical-incident-responding
- Incident Reporting Questions

  hcbsir@dhs.state.ia.us
- Iowa Medicaid Portal Access (IMPA) Website
  https://secureapp.dhs.state.ia.us/impa/
- HCBS Specialists Contacts
  http://dhs.iowa.gov/ime/members/medicaid-a-to-z/hcbs/hcbs-contacts

FFS Resources cont.

- Iowa Department of Human Services forms https://dhs.iowa.gov/ime/providers/forms
- Critical Incident Reporting Access Request Form
  - Need option “Critical Incident Report” in IMPA

  https://www.tfaforms.com/243237
- Training and technical assistance website with schedule of upcoming trainings

  https://dhs.iowa.gov/dhs.iowa.gov/ime/Providers/tools-trainings-and-services/CBT-for-LTSS

Member Eligibility Determination

Call the Eligibility and Verification System (ELVS)

- 515-323-9639 (locally in Des Moines)
- 1-800-338-7752 (toll free)
- Available 24 hours a day, seven days a week

Questions

HCBS QIO Incident Reporting Mailbox

hcbsir@dhs.state.ia.us

Amerigroup

iaincidents@Amerigroup.com

https://providers.amerigroup.com

515-327-7012, ext. 106-103-5185

Provider Services 800-454-3730

Iowa Total Care

Fax 1-833-205-1251

QOCCIR@IowaTotalCare.com

Summary

- Reviewed Iowa Administrative Code (IAC) requirements for incident reporting
- Defined the difference between a major and minor incident
- Identified the reporting process for fee-for-service (FFS) members
- Common errors identified
- Locating, completing, and submitting an incident report for:
  - Amerigroup
  - Iowa Total Care
  - and FFS members
- Common reporting errors
- ER Claims review process
- Resource Information

In Closing

Thank you for attending.

Post-attendee Survey
Please complete this survey to let us know your feedback.

https://www.surveymonkey.com/r/RQ8QWJY

Email HCBSTTA@dhs.state.ia.us with any questions or technical issues